

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

Novo Nordisk PAC

ADDRESS (number and street)
▼

1155 F Street NW

Suite 1150

☐Check if different
than previously
reported. (ACC)

Washington

DC

20004

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00424838

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2010

through

09

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael Mawby

Signature of Treasurer

Electronically Filed by Michael Mawby

Date

10

22

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**
Transaction ID :

Report is amended based on updated information regarding disbursement dates for federal candidates committees for Rep. Space and Rep. Butterfield.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 80

Write or Type Committee Name
Novo Nordisk PAC

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	12335.01
(b) Cash on Hand at Beginning of Reporting Period	27366.75	
(c) Total Receipts (from Line 19)	7471.00	66137.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	34837.75	78472.01
7. Total Disbursements (from Line 31)	32859.86	76494.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1977.89	1977.89
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Novo Nordisk PAC

Report Covering the Period:

From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	6345.00	40000.00
(ii) Unitemized	1126.00	26137.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7471.00	66137.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7471.00	66137.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7471.00	66137.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7471.00	66137.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	32.94	299.90	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	32.94	299.90	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32826.92	76194.22	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	32859.86	76494.12	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32859.86	76494.12	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7471.00	66137.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7471.00	66137.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32.94	299.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32.94	299.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Andrew R. Ajello

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Diabetes Sales

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-2-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Andrew R. Ajello

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Diabetes Sales

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-2-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Vincent L. Ambrosine

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Growth Hormone Therapy Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-3-16-5

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Vincent L. Ambrosine

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

Transaction ID: 20100924-3-11-31

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Robert K. Anderson

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	1	0

Transaction ID: 20100913-4-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Robert K. Anderson

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

Transaction ID: 20100924-4-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Frank Armenante

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Area Support Manager - Managed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-5-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Frank Armenante

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Area Support Manager - Managed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-5-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

James M. Austin

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-6-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

James M. Austin

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-6-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Customer Channel Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-8-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Customer Channel Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-8-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kristen C. Beck

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Clinical Trial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-9-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kristen C. Beck

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Clinical Trial Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-9-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Daye M. Bexley

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-12-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Daye M. Bexley

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-12-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-14-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-14-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Terry P. Bloecher

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Growth Hormone Therapy Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-15-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Terry P. Bloecher

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Growth Hormone Therapy Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-15-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Thomas H. Boyer

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-17-16-5

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Thomas H. Boyer

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-17-11-31

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Diane C. Boynton

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II - Institution Acc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-18-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Diane C. Boynton

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II - Institution Acc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-18-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

William P. Breitenbach

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-19-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

William P. Breitenbach

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-19-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Francis X. Brown

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Business Process Cha

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-20-16-5

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Francis X. Brown

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Business Process Cha

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-20-11-31

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Managed Markets / Health Ec

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-22-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Managed Markets / Health Ec

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-22-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Erin L. Byrne

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Changing Diabetes and Public

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-23-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Erin L. Byrne

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Changing Diabetes and Public

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-23-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Anne P. Cannon

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Liaison - Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-24-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Anne P. Cannon

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Liaison - Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-24-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Information Technology Secur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-26-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Information Technology Secur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-26-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-27-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-27-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Sean P. Clements

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Media Relations &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-28-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-29-16-5

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-28-11-31

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher Conner

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Field Health Econo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-30-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher Conner

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Field Heath Econo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-29-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-31-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-30-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

John E. Davis

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-35-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

John E. Davis

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-35-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Patricia A. Denman

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Transaction ID: AAC8EAD0B02B20FA42E

Amount of Each Receipt this Period

480.00

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Basil Denno

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Diabetes Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-36-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Basil Denno

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Diabetes Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-36-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Mary M. Dugan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-39-16-5

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Mary M. Dugan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-39-11-31

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Kim B. Elston

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Regional Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-40-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kim B. Elston

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Regional Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-40-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-41-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-41-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Philip F. Fornecker

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Strategic Business Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-43-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Philip F. Fornecker

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Strategic Business Op

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-43-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Human Resources

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-47-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Human Resources

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-47-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Business Relationship

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-48-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Business Relationship

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-48-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Bryan J. Gallagher

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Medical Science Director - Endocrinolo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-50-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 80

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bryan J. Gallagher

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Medical Science Director - Endocrinolo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-50-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Robert D. Gawlikowski

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-51-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Robert D. Gawlikowski

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-51-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Karin B. Gillespie

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - National Changing Dia

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-52-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Karin B. Gillespie

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - National Changing Dia

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-53-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Endocrinology District Business Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-53-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Endocrinology District Business Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-54-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joanne M. Golankiewicz

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Marketing Effectiven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-55-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joanne M. Golankiewicz

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Marketing Effectiven

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-56-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Intellectual Property/ Patent Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-56-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Intellectual Property/ Patent Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-57-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Gary W. Grote

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Managed Care & Gover

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-58-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Gary W. Grote

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Managed Care & Gover

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-59-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Sharon J. Haggerty

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Customer Channel Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-59-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Sharon J. Haggerty

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Customer Channel Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-60-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Samantha D. Hall

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-60-16-5

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Samantha D. Hall

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-61-11-31

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Edward F. Hanover

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Corporate Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-61-16-5

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 80

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward F. Hanover

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Corporate Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-62-11-31

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Scientific Director - M

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-62-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-63-16-5

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-63-11-31

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Miguel A. Hechavarria

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-64-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Miguel A. Hechavarria

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-64-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 36 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Matthew J. Hill

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-65-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Matthew J. Hill

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-65-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Biopharmaceutical Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-66-16-5

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Biopharaceutical Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-66-11-31

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-68-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-69-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Walter J. Hunter

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Medical Scientifi

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-70-16-5

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Walter J. Hunter

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Medical Scientifi

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-71-11-31

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Mar

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-72-16-5

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-73-11-31

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Diabetes Field Marke

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-74-16-5

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Diabetes Field Marke

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-75-11-31

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Doxie A. Jordan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Diabetes Sa

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-75-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Doxie A. Jordan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Diabetes Sa

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-76-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

James A. Kalmes

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Area Managed Markets Sales

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-76-16-5

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

James A. Kalmes

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Area Managed Markets Sales

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-77-11-31

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-77-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-78-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-78-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-79-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Carol L. Krause

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Liaison - Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-80-16-5

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Carol L. Krause

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Liaison - Regional

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-81-11-31

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Diabetes Brand Market

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-81-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Diabetes Brand Market

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-82-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Charles J. Maerzke

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive - Kaiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-84-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Charles J. Maerzke

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive - Kaiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-85-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-86-16-5

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Government

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-87-11-31

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Institutional Regional Business Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-87-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Institutional Regional Business Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-88-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-90-16-5

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-91-11-31

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher N. McGowen

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-91-16-5

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher N. McGowen

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-92-11-31

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Victoza

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-93-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Victoza

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-94-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Health Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-94-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Health Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-95-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Bridget M. Molloy

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Regional Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-96-16-5

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bridget M. Molloy

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Regional Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-97-11-31

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Global Chief Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-99-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Global Chief Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-99-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Elizabeth A. Moses

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Clinical Development,

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-98-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth A. Moses

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Clinical Development,

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-100-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Medical Science Liaison Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-100-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Medical Science Liaison Regional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-101-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Stephen D. Noyes

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Car

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-102-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Stephen D. Noyes

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Car

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-103-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Deputy Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-103-16-5

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Deputy Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-104-11-31

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Dylan M. Pensabene

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-106-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Dylan M. Pensabene

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-107-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Gretchen S. Peters

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-107-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Gretchen S. Peters

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-108-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joseph C. Piscitello

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-108-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joseph C. Piscitello

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-109-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-109-16-5

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-110-11-31

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Robert J. Powers

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-111-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Robert J. Powers

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-112-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Patrick M. Quinn

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Trade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-112-16-5

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Patrick M. Quinn

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Trade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-113-11-31

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Erin J. Reily

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Brand Director - Norditropin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-113-16-5

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Erin J. Reily

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Brand Director - Norditropin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-114-11-31

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Customer Channel Mark

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-115-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Customer Channel Mark

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-116-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-116-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-117-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kevin Ryan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-117-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kevin Ryan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-118-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Contract Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-118-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Contract Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-119-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-119-16-5

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-120-11-31

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-120-16-5

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Manager - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-121-11-31

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Legal/Patents/Governm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-121-16-5

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Legal/Patents/Governm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-122-11-31

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Montgomery C. Smith

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Brand Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

Transaction ID: 20100924-123-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Jonathan W. Snow

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Business Support - Managed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	1	0

Transaction ID: 20100913-123-16-5

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Jonathan W. Snow

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Business Support - Managed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

Transaction ID: 20100924-124-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lisa G. Suttner

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Regulatory Product Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-125-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Lisa G. Suttner

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Regulatory Product Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-126-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Robert A. Toepfer

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-128-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Robert A. Toefer

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

Transaction ID: 20100924-129-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Clinical Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	1	0

Transaction ID: 20100913-129-16-5

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Clinical Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

Transaction ID: 20100924-130-11-31

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Michael Vargas

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Application Devel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-130-16-5

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Michael Vargas

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Application Devel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-131-11-31

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Dana G. Vaughns

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Endocrinology District Business Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-131-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Dana G. Vaughns

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Endocrinology District Business Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-132-11-31

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Business Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-133-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Business Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-134-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Chung-Sing W. Weng

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Biostatistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-134-16-5

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Chung-Sing W. Weng

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Director - Biostatistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-135-11-31

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Ellene S. Whitmore

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Biopharmaceutical Sales Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-135-16-5

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 80

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Ellene S. Whitmore

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Biopharmaceutical Sales Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-136-11-31

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Intellectual Property Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Transaction ID: 20100913-136-16-5

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Intellectual Property Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Transaction ID: 20100924-137-11-31

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Biopharmaceuticals

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-137-16-5

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Biopharmaceuticals

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-138-11-31

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

Transaction ID: 20100913-138-16-5

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Transaction ID: 20100924-139-11-31

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

20.00

TOTAL This Period (last page this line number only)

6345.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 / 80

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address 444 N Capitol Street NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Bank Fee Aug 10

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 4275E8BDADB3ED4BBD

Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

32.94

SUBTOTAL of Disbursements This Page (optional)

32.94

TOTAL This Period (last page this line number only)

32.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 / 80

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Adler for Congress	Transaction ID: 6950BBE18945C88F847 Date of Disbursement																				
Mailing Address 14 Knightswood Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	1	0												
City Marlton State NJ Zip Code 08053	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name John H. Adler	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 03																					
B. Full Name (Last, First, Middle Initial) Bob Etheridge for Congress Committee	Transaction ID: CE7D4CDEAC9941B9889 Date of Disbursement																				
Mailing Address Post Office Box 28001 PO Box 28001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	8		2	0	1	0												
City Raleigh State NC Zip Code 27611	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Bob Etheridge	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 02																					
C. Full Name (Last, First, Middle Initial) Charles A. Gonzalez Congressional Campaign	Transaction ID: 7D283A0EAF13A5FB1CE Date of Disbursement																				
Mailing Address PO Box 12612	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	1	0												
City San Antonio State TX Zip Code 78212	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Charles A. Gonzalez	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 20																					

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Coburn for Senate 2010 Mailing Address Post Office Box 977	Transaction ID: 3DC9B1F4069579CB03C Date of Disbursement <div> <div>09</div> <div>28</div> <div>2010</div> </div>
City Muskogee State OK Zip Code 74402 Purpose of Disbursement 2010 General Candidate Name Tom A. Coburn Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OK District:	Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type
B. Full Name (Last, First, Middle Initial) Dave Camp for Congress 2010 Mailing Address 5915 Eastman Avenue Suite 100 City Midland State MI Zip Code 48640 Purpose of Disbursement 2010 General Candidate Name Dave Camp Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 04	Transaction ID: 549A34897BDF581FE0A Date of Disbursement <div> <div>09</div> <div>03</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type
C. Full Name (Last, First, Middle Initial) Diana DeGette for Congress Mailing Address PO Box 61337 City Denver State CO Zip Code 80206 Purpose of Disbursement 2010 General Candidate Name Diana L. DeGette Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 01	Transaction ID: 351F0CBD28C97603F35 Date of Disbursement <div> <div>09</div> <div>29</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type
SUBTOTAL of Disbursements This Page (optional) ▶	<div>3000.00</div>
TOTAL This Period (last page this line number only) ▶	<div></div>

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 74 / 80

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

<p>A. Full Name (Last, First, Middle Initial) Donald A. Manzullo for Congress</p> <p>Mailing Address PO Box 7783 PO Box 7783</p> <p>City Rockford State IL Zip Code 61126</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Donald A. Manzullo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 28152F7089D22514633</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Donna Christensen Campaign</p> <p>Mailing Address PO Box 5197</p> <p>City St. Croix State VI Zip Code 00823</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Donna Marie Christian-Christensen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VI District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 6331EAC5FCA00B4DB4B</p> <p>Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Cliff Stearns</p> <p>Mailing Address PO Box 308</p> <p>City Silver Springs State FL Zip Code 34489</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Clifford B. Stearns</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 78984F7105A8E3F6F70</p> <p>Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 4500.00</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC**A.**Full Name (Last, First, Middle Initial)
Friends of Dave Reichert

Mailing Address PO Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement
2010 GeneralCandidate Name
David G. ReichertOffice Sought: ☒ House
☐ Senate
☐ President

State: WA District: 08

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼011
Category/
Type

Transaction ID: 317A107C4634BB53023

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	0

Amount of Each Disbursement this Period

1000.00

B.Full Name (Last, First, Middle Initial)
Friends of John Barrow

Mailing Address PO Box 8166

City Savannah State GA Zip Code 31412

Purpose of Disbursement
2010 GeneralCandidate Name
John Jenkins BarrowOffice Sought: ☒ House
☐ Senate
☐ President

State: GA District: 12

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼011
Category/
Type

Transaction ID: 032AB3E47CCA896887F

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Amount of Each Disbursement this Period

1000.00

C.Full Name (Last, First, Middle Initial)
Georgians for Isakson

Mailing Address Post Office Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement
2010 GeneralCandidate Name
Johnny IsaksonOffice Sought: ☐ House
☒ Senate
☐ President

State: GA District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼011
Category/
Type

Transaction ID: FC48912E29AB4200BA7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Hoyer for Congress	Transaction ID: A41F370FA7B762EF41B Date of Disbursement																				
Mailing Address 607 14th Street, NW Suite 800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	1	0												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Steny H. Hoyer	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
B. Full Name (Last, First, Middle Initial) John Lewis for Congress	Transaction ID: F61354E8FA396B5558E Date of Disbursement																				
Mailing Address PO Box 2323	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	1	0												
City Atlanta State GA Zip Code 30301	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name John R. Lewis	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
C. Full Name (Last, First, Middle Initial) Lee Terry for Congress	Transaction ID: 739B601BBB5BCAB4C11 Date of Disbursement																				
Mailing Address PO Box 540098	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	1	0												
City Omaha State NE Zip Code 68154	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Lee Terry	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Michael Burgess for Congress	Transaction ID: FAC25E4E107E2999CBF Date of Disbursement																				
Mailing Address PO Box 2334	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	3		2	0	1	0												
City Denton State TX Zip Code 76202	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Michael C. Burgess	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					
B. Full Name (Last, First, Middle Initial) Novo Nordisk Inc	Transaction ID: VF84FFF3BB9347EAB4E0 Date of Disbursement																				
Mailing Address 100 College Road West	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	7		2	0	1	0												
City Princeton State NJ Zip Code 08540	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Donna Marie Christian-Christensen	<table border="1"> <tr> <td colspan="10">326.92</td> </tr> </table>	326.92																			
326.92																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VI District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011	In-Kind																				
C. Full Name (Last, First, Middle Initial) Pallone for Congress	Transaction ID: 5EA2F61CF3C073529C6 Date of Disbursement																				
Mailing Address PO Box 3176	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	1	0												
City Long Branch State NJ Zip Code 07740	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Frank Pallone, Jr.	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					

SUBTOTAL of Disbursements This Page (optional)

2326.92

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Pascrell for Congress	Transaction ID: F498FB3B5152D83A048 Date of Disbursement																				
Mailing Address PO Box 640	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	1	0												
City Totowa State NJ Zip Code 07511	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name William J. Pascrell, Jr.	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
B. Full Name (Last, First, Middle Initial) Richard Burr Committee; the	Transaction ID: BFE4DD7908ABF76DA66 Date of Disbursement																				
Mailing Address Post Office Box 5928	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	1	0												
City Winston-Salem State NC Zip Code 27113	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Richard M. Burr	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
C. Full Name (Last, First, Middle Initial) Rush Holt for Congress	Transaction ID: 2E8BFC1597E672520FC Date of Disbursement																				
Mailing Address PO Box 782	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		3	0		2	0	1	0												
City Pennington State NJ Zip Code 08534	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Rush D. Holt	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 12 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">5500.00</td> </tr> </table>	5500.00																			
5500.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Steve Rothman for New Jersey Inc.	Transaction ID: E4052861EBF2709E3D8 Date of Disbursement																				
Mailing Address PO Box 714	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	8		2	0	1	0												
City Hackensack State NJ Zip Code 07602	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name Steven R. Rothman	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 09	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Sue Myrick for Congress	Transaction ID: 2D94B68A783EAD4B52C Date of Disbursement																				
Mailing Address PO Box 37091	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	8		2	0	1	0												
City Charlotte State NC Zip Code 28237	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Sue Wilkins Myrick	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Upton for All of Us	Transaction ID: 0C42EB67DE272D01E92 Date of Disbursement																				
Mailing Address PO Box 490	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	1	0												
City St. Joseph State MI Zip Code 49085	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Fredrick Stephen Upton	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.	Full Name (Last, First, Middle Initial) Walden for Congress	Transaction ID: B137D31CA883DBA9BAE Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0
	Mailing Address PO Box 1091	
	City Hood River State OR Zip Code 97031	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 2010 General	011 Category/ Type
	Candidate Name Greg P. Walden	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 02	
B.	Full Name (Last, First, Middle Initial) Whitfield for Congress Committee	Transaction ID: D90C2B0E8559CA9A5DA Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0
	Mailing Address PO Box 391	
	City Hopkinsville State KY Zip Code 42241	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 2010 General	011 Category/ Type
	Candidate Name Edward Whitfield	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 01	
C.	Full Name (Last, First, Middle Initial) Wyden for Senate	Transaction ID: 78B39DBE3BB181026EE Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0
	Mailing Address 232 NE 9th Avenue	
	City Portland State OR Zip Code 97232	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement 2010 General	011 Category/ Type
	Candidate Name Ron Wyden	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	
SUBTOTAL of Disbursements This Page (optional)		4500.00
TOTAL This Period (last page this line number only)		32826.92